

## STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
Official Use Only

## **COVER PAGE**

Please type or print in ink.

A PUBLIC DOCUMENT

AME OF FILER (LAST)	(FIRST)	Dicester (MIDDLE)		
SOE	MAY	z 2019 MAR 18 AM 8: 19		
1. Office, Agency, or Cour	t .	DEPT OF LUCE A MORNING		
Agency Name (Do not use acro	onyms)			
Natural Resources Agen	ncy	•		
Division, Board, Department, Dis	trict, if applicable	Your Position		
Department of Conserva	epartment of Conservation-Division of Oil,Gas & Geotherm			
► If filing for multiple positions,	If filing for multiple positions, list below or on an attachment. (Do not use acronyms)			
Agency:	. *	Position:		
2. Jurisdiction of Office (	Check at least one box)			
State		☐ Judge or Court Commissioner (Statewide Jurisdiction)		
Multi-County		County of		
* · · · · · · · · · · · · · · · · · · ·	-			
Li Oity of		Other		
3. Type of Statement (Chec	ck at least one box)			
Annual: The period covered		Leaving Office: Date Left/		
December 31, 201 -or-	18.	(Check one circle.)		
The period covered December 31, 201	d is, th 18.	orough O The period covered is January 1, 2018, through the date of leaving office.		
Assuming Office: Date as:	sumed/	O The period covered is/, through the date of leaving office.		
Candidate: Date of Election	n and office	sought, if different than Part 1:		
4. Schedule Summary (m	ust complete) > Total nu	umber of pages including this cover page:2		
Schedules attached	- Total Inc	ambor of pagoo molading the cover page.		
Schedule A-1 - Investme	ante echodulo attached	Schedule C - Income, Loans, & Business Positions – schedule attached		
=		Schedule D - Income - Gifts - schedule attached		
<ul> <li>Schedule A-2 - Investments – schedule attached</li> <li>Schedule D - Income – Gifts – schedule attached</li> <li>Schedule B - Real Property – schedule attached</li> <li>Schedule E - Income – Gifts – Travel Payments – schedule attached</li> </ul>				
	,			
-or- 🗆 None - No reporta	ble interests on any schedule			
i. Verification				
MAILING ADDRESS STRE		CITY STATE ZIP CODE		
(Business or Agency Address Recomment 801 K Street	•	ramento CA 95814		
DAYTIME TELEPHONE NUMBER	Jaci	EMAIL ADDRESS CA 93614		
( 916 ) 322-9766		may.soe@conservation.ca.gov		
I have used all reasonable diliger	nce in preparing this statement. I har dules is true and complete. I ackno	we reviewed this statement and to the best of my knowledge the information contains		
I certify under penalty of perju	ry under the laws of the State of	California that the foregoing is true and correct.		
0.44.40	·	musoe		
Date Signed 3-11-19	th day year	Signature		
(mont	th, day, year)	(File the originally signed paper statement with your filing official.)		

## **SCHEDULE A-1 Investments**

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized. Do not attach brokerage or financial statements.

CALIFORNIA FORM FAIR POLITICAL PRACTICES CO	
Name	

<b>&gt;</b>	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	Halliburton	Schlumberger
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	Energy Equipment and Services	Energy Equipment and Services
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 <b>X</b> \$10,001 - \$100,000	<b>x</b> \$2,000 - \$10,000
	S 100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	X Stock Other (Describe)	Stock Other(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	// 18 / / 18	
_	ACQUIRED DISPOSED	ACQUIRED DISPOSED
<b>&gt;</b>	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
		*
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	MATURE OF INNESTMENT
	NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
	(Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)	. O Income Received of \$500 or More (Report on Schedule C)
	IE APPLICADI E LIST DATE.	IF ADDITIONAL F. LICT DATE.
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
<u></u>	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
	<u> </u>	
	GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	FAIR MARKET VALUE	FAIR MARKET VALUE
	\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	NATURE OF INVESTMENT
	Stock Other	Stock Other
	(Describe)	(Describe)
	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	// 18// 18	/ / 18 / / 18
	ACQUIRED DISPOSED	ACQUIRED DISPOSED
		1

Comments: .